re: FEC 3x filing for Cookbash 31 AM 8: 39

FEC MAIL CENTER

Sir or Madam,

I am the treasurer for Exposing Marxist PAC, which was formed last fall. Last December we received a letter from the Reports Analysis Division, stating that we had failed to file our FEC Form 3x for the 3<sup>rd</sup> quarter.

We made a call to Reports Analysis, and were told that it would be okay to just mail in the 3<sup>rd</sup> quarter report by the deadline for end-of-year report, January 31, 2013.

Our committee, up to now, has never received or disbursed any funds. I am a novice at fundraising, and this is my first time filling out a Form 3x. I put "zeroes" in the appropriate boxes.

Schedules H through L appear to be forms that are not necessary for my group to fill out. I put the committee name at the top of the page on each of those forms, and left the rest of the page blank.

Enclosed are three Reports: post-general, third quarter, and end-of-year.

Also enclosed is a copy of the letter we received last December, from the Reports Analysis Division.

Yours very truly,

John Hilt

312-671-0909 (cell) 4051 S. Sacramento Chicago, IL 60632



## FEDERAL ELECTION CANAMISSION WASHINGTON, D.C. 20463 FEC MAIL CENTER

December 14, 2012

RQ-7

JOHN HILT, TREASURER EXPOSING MARXISTS PAC 503 W HAPPFIELD DR APT 203 ARLINGTON HEIGHTS, IL 600047119

**IDENTIFICATION NUMBER: C00534016** 

REFERENCE: POST-GENERAL REPORT 10/26/2012 - 11/26/2012

#### **DEAR TREASURER:**

It has come to the attention of the Federal Election Commission that you may have failed to file the above referenced report of receipts and disbursements or failed to file a report covering the entire reporting period as required by the Federal Election Campaign Act, as amended.

It is important that you file this report immediately with the Federal Election Commission, 999 E Street, N.W., Washington, DC 20463. Please note that <u>electronic filers must submit their reports electronically</u>, as per 11 CFR §104.18. A copy of the report or relevant portions must also be filed with the Secretary of State or equivalent State officer unless the State is exempt from the federal requirement to receive and maintain paper copies. You can verify the Commission's receipt of any documents submitted by your committee on the FEC website at www.fec.gov.

The failure to timely file a complete report may result in civil money penalties, an audit or legal enforcement action. The civil money penalty calculation for late reports does not include a grace period and begins on the day following the due date for the report. Due to heightened security screening measures, delivery of mail by the US Postal Service may be delayed. The Commission recommends that you submit your report via overnight delivery or courier service.

If you have any questions regarding this matter, please contact Sari Pickerall in the Reports Analysis Division on our toll free number (800)424-9530. Our local number is (202)694-1130.

Sincerely,

Debie Chaina

Debbie Chacona
Assistant Staff Director
Reports Analysis Division (RAD)

**FEC** FORM 3X

Only

FE6AN026

#### REPORT OF RECEIPTS AND DISBURSEMENTS 2013 J N 31 AM 8: 39 For Other Than An Authorized Committee

RECEIVED

FEN MAIL CENTIFICATION ONLY TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. Expositing Mairix 155Tis PAC 15.03 W. Happfiled ADDRESS (number and street) Check if different than previously reported. (ACC) STATE A ZIP CODE CITY A 2. FEC IDENTIFICATION NUMBER ▼ 3. IS THIS NEW **AMENDED** OR REPORT (N) (A) 4. TYPE OF REPORT (b) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) Report (Non-Election Year Only) (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul-20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day (d) Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of 01 201 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer John Date Signature of Treasurer NOTE: Submission of false, according to the penalties of 2 U.S.C. §437g. Office **FEC FORM 3X** Use Rev. 12/2004

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Marx 151 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 0.0.0.0 Beginning of Reporting Period..... 0.0.0.0 0.0.0 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 0.0.0.0 6(a) and 6(c) for Column B) ..... 0,0,0,0 7. Total Disbursements (from Line 31).......... Cash on Hand at Close of Reporting Period 0.0.00 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.0.0.0 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0,0,0,0 Schedule C and/or Schedule D) .....

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

#### **DETAILED SUMMARY PAGE**

of Receipts

	FEC Form 3X (Rev. 06/2004)		Page 3
V	Vrite or Type Committee Name		
_	Exposing Marxis	TS PAC	
F	Report Covering the Period: From:	7 0 1 2 0 1 2 To	09 30 2012
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees  (i) Itemized (use Schedule A)	0000	ρρορ
	(i) Remized (dea Contradio A)		
	(ii) Uniternized	0.0.00	0.0.0.0
	(iii) TOTAL (add	4000	
	Lines 11(a)(i) and (ii)▶		
	(b) Political Party Committees	0.0.0.0	0000
	(c) Other Political Committees		
	(such as PACs)(d) Total Contributions (add Lines	1	0.0.0.0
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶	0.0.0.0	0.000
12.	Transfers From Affiliated/Other		
	Party Committees	0.0.0.0	0.0.0.0
13.	All Loans Received	0.0-0.0	0,000
	Loan Repayments Received	0.0.0.0	0000
15.	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0000	7777
16.	Refunds of Contributions Made		
	to Federal Candidates and Other		
17	Political Committees Other Federal Receipts	0.0.0.0	0.0.0.0
17.	(Dividends, Interest, etc.)	0000	0005
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account	0000	
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)	-0.0-0.0	0.0-0.0
	(c) Total Tranafers (add 18(n) and 18(b))	0.0.0.0	0000
19.	Total Receipts (add Lines 11(d),		Books and the second se
	12, 13, 14, 15, 16, 17, and 18(c))▶	0.0.0.0	0.0.0.0
00	Total Cadaral Bassists	ton to have come about a control facility to improve the control and defined and the control a	territorio de la constanti de la constanti de la constanti del constanti de la constanti de la constanti del const
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	0000	λλλ
	(CODE COLOT FOR TOTAL FOR	L. L. C.	1-2-1-2-U-U-U-U-U-U-U-U-U-U-U-U-U-U-U-U-

15051023568

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Petiod	COLUMN B Calendar Year-to-Date
21.	. Operating Expenditures: (a) Allocated Federal/Non-Federal		Calcidal Teal-to-Date
	Activity (from Schedule H4)	1000 m	7000
	(i) Federal Share		
	(ii) Non-Federal Share	0.0.0.0	0.0.0.0.0
	(b) Other Federal Operating	٨ ٨ ٨ ٨	
	Expenditures(c) Total Operating Expenditures		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	(add 21(a)(i), (a)(ii), and (b))	▶	0000
22.	Transfers to Affiliated/Other Party		
23.	Committees	0.0.1.01	L
	Federal Candidates/Committeea and Other Political Committees	0000	$\sim \sim \sim$
24.	Independent Expenditures		
	(use Schedule E)	0.000	00.00j
25.	(2 U.S.C. §441a(d))	00.00	0000
	(use Schedule F)		
26.	Loan Repayments Made		2000
		0.0.00	
	Loans Made Refunds of Contributions To:		1.0000
	(a) Individuals/Persons Other Than Political Committees	0.000	000
	(b) Political Party Committees	0.000	<u> </u>
	(c) Other Political Committees (such as PACs)	0.000	0000
	(3001 83 1 703)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))		L
29.	Other Disbursements	00.20	00.00
30.	Federal Election Activity (2 U.S.C. §431 (a) Allocated Federal Election Activity	(20))	
	(from Schedule H6)		
	(i) Federal Share		0.000
	, , , , , , , , , , , , , , , , , , ,	0.000	0000
	(ii) "Levin" Share(b) Federal Election Activity Paid Entire	the state of the s	
	With Federal Funds		00-00
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b)).	<b>L</b> 0000	0.000
31	Total Disbursements (add Lines 21(c), 2	22	
· · ·	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	fine A A A A A W W W W W W W W W W W W W W	$\bigcap \bigcap \bigcap \bigcap$
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		
	TOTAL COLUMN TOTAL		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	LO I OILL ON (LOS OFFERD)		r ugo o		
III. Net Contributions/Operating Expenditures					
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	0000	0000		
34.	Total Contribution Refunds (from Line 28(d))	0.00	0000		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	00.00	00.00		
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	00.00	00.00		
37.	Offsets to Operating Expenditures (from Line 15, page 3)	00.00	0000		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.0.00	00.00		

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SCHEDULE A (FEC Form 3X)					FOR LINE NUMBER: PAGE							
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)								
	· · · · · · ·		Detailed Summary Page	1	11a	$\vdash$	11b	11c	<b></b>	12 16		
A	ny information copied from such Reports and State for commercial purposes, other than using the	atements manage	ay not be sold or used by any pe address of any political committee	ersor	for the	pur antrit	pose o	of solicitie	ng cont	ributions		
1	NAME OF COMMITTEE (In Full)											
	Exposing Marxists	PAC										
_	Full Name (Last, First, Middle Initial)				Date	of D	accint					
A.	Mailing Address		$\neg$	Date	) n	o e	ا ، او	7898	777			
	City	Zip Code	1	Look		lancards.	<u>.</u>					
			_	Amou	nt of	Each	Receipt	this Pe	riod			
	FEC ID number of contributing federal political committee.	C					41-1					
	Name of Employer	Occupation		1								
	Receipt For:	Aggregate	Year-to-Date ▼	$\dashv$								
	Primary General Other (specify) ▼											
		L										
В.	Full Name (Last, First, Middle Initial)				Date (	of Re	eceipt		-			
	Mailing Address				Last Lose Vascass							
	City	State	Zip Code	-	A -			- The				
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	federal political committee.				L	ستند	- Al			لـــــــا		
	Name of Employer	Occupation		+								
	Receipt For:	Aggregate	Year-to-Date ▼	$\dashv$								
	Primary General		-									
	Other (specify) ▼	La										
C.	Full Name (Last, First, Middle Initial)				Date o	of Re	ceipt					
	Mailing Address				TW T	7	100		<u> </u>	777		
	City State		Zip Code	1	Amour	ut of	Fach I	Receipt 1	his Pe	was face of the second		
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	Name of Employer	Occupation										
	Receipt For:	Year-to-Date ▼										
	Primary General Other (specify) ▼											
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A.	Full Name (Last,	First, Middle Initial)							Date o	f Di	sburse	ment					
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	Candidate Name					eren de				t of Each Disbursement this Period							
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	- 🧸 -	Senate	<b></b>	Primary	General												
		President		Other (spec	aify) ▼												
_	State:	District:															
SI	UBTOTAL of Disb	ursements This Page	(optional)	••••••••				<b>&gt;</b>			Maria de la compansión de		A Land	O, O,	0	0	
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11	OTAL This Period (last page this line number only)							•	-ساسا	3_	33			. برا <u>ن</u>	<u>,                                    </u>		

#### SCHEDULE C (FEC Form 3X) LOANS

**PAGE** Use separate schedule(s) OF for each category of the FOR LINE 13 OF FORM 3X **Detailed Summary Page** NAME OF COMMITTEE (In Full) LOAN SOURCE Full Name (Last, First, Middle Initial) Election: **Primary** General Other (specify) Mailing Address ZIP Code City State Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period TERMS Date Due Date Incurred Interest Rate Secured: Yes % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation **Amount** ZIP Code Guaranteed State Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation **Amount** Guaranteed City State ZIP Code Outstanding: Name of Employer 4. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount State ZIP Code City Guaranteed Outstanding: SUBTOTALS This Period This Page (optional).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

TOTALS This Period (last page in this line only)......

### SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

Federal Election Commission, Washington, D.C. 20463						
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER				
Exposing Marxists PAC		C.0.0534016				
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)				
Full Name						
		9%				
Mailing Address		TOTAL , TOTAL , TV TV TV TV				
	Date Incurred or Established					
City State Zip Code	Date Due					
A. Has loan been restructured? No Yes	If yes, date originally incurre	d Company				
B. If line of credit,	Total Outstanding					
Amount of this Draw:	Balance:					
C. Are other parties secondarily liable for the debt incurre	ed?	<del></del>				
	st be reported on Schedule C.)					
D. Are any of the following pledged as collateral for the lo	pan: real estate, personal	What is the value of this collateral?				
property, goods, negotiable instruments, certificates of	deposit, chattel papers,					
stocks, accounts receivable, cash on deposit, or other	similar traditional collateral?					
No Yes If yes, specify:		Does the lender have a perfected security				
	interest in it? No Yes					
E. Are any future contributions or future receipts of interes	st income, pledged as	What is the estimated value?				
collateral for the loan? No Yes If yes, s	pecify:					
		The bank of the state of the st				
	1					
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	· · · · · · · · · · · · · · · · · · ·				
Date account established:	Address:					
/ / /	City, State, Zip:					
F. If neither of the types of collateral described above was	pledged for this loan, or if the	amount pledged does not equal or exceed				
the loan amount, state the basis upon which this loan	was made and the basis on wh	ich it assures repayment.				
G. COMMITTEE TREASURER	····	DATE				
Typed Name Jahn Hilt		Land Land Land Action				
Signature 13 0 1 2 3						
H. Attach a signed copy of the loan agreement.						
I. TO BE SIGNED BY THE LENDING INSTITUTION:						
<ol> <li>To the best of this institution's knowledge, the ter are accurate as stated above.</li> </ol>	ms of the loan and other inform	nation regarding the extension of the loan				
The loan was made on terms and conditions (inclining similar extensions of credit to other borrowers of	luding interest rate) no more fa	vorable at the time than those imposed for				
III. This institution is aware of the requirement that a complied with the requirements set forth at 11 CF	loan must be made on a basis	s which assures repayment, and has ng this loan.				
AUTHORIZED REPRESENTATIVE		DATE				
Typed Name	· · · · · · · · · · · · · · · · · · ·					
Signature Title	3					

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#### SCHEDULE D (FEC Form 3X) PAGE OF (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 **Excluding Loans** numbered line) 10 NAME OF COMMITTEE (In Full) Exposing Marxists PAC Nature of Debt (Purpose): Mailing Address Zip Code City Outstanding Balance Beginning This Period **Amount Incurred This Period** Payment This Period Outstanding Balance at Close of This Period B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period **Amount Incurred This Period** Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address State Zip Code City Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

#### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	EMIZED INDEPENDENT EXPENDITURES			FOR LINE	24 OF FORM 3X
NA	ME OF COMMITTEE (In Full)		FEC II	DENTIFICAT	ION NUMBER Y
	Exposing Marxists PAC		C	0.5.3	4016
	eck if 24-hour report 48-hour report New report Amends report	ort filed on			
	Full Name (Last, First, Middle Initial) of Payee	Date	9		
			K W	, , ,	434.444
	Mailing Address				
		Amo	ount		
	City State Zip Code		t -4-2		
	Purpose of Expenditure Category/	Office Sou	ight:	House	State:
	Туре		-	Senate President	District:
	Name of Federal Carxdidate Supported or Opposed by Expenditure:	Check On	e: [	Support	Oppose
	Calendar Year-To-Date Per Election	Disbursem	ent For:	Primary	General
	for Office Sought		Other (sp	ecify) ▶	
	Full Name (Last, First, Middle Initial) of Payee	Date	<del></del>		
			474	, 656	777777
	Mailing Address	Amo	ount		
	City State Zip Code				<del></del>
	•	1	4		
	Purpose of Expenditure Category/	Office Sou	ight:	House	State:
	Type		<u>_</u>	Senate President	District:
	Name of Federal Candidate Supported or Opposed by Expenditure:	Check On	e:	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursem	ent For: Other (sp	Primary	General
		<u></u>	Other (sp	ecity) <u> </u>	
	A Designation of the state of t		- mary Commission		
	(a) SUBTOTAL of Itemized Independent Expenditures	. >		<del></del>	0.0.0.0
1	(b) SUBTOTAL of Uniternized Independent Expenditures	. >			0.0.0.0
		Acres 2			
•	(c) TOTAL Independent Expenditures	•			0.0.0.0
١	Under penalty of perjury I dentify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent or party committee) any political party committee or its agent.				
1	Signafure Date	0.1	2.8	2.0	13
4					· · · · · · · · · · · · · · · · · · ·

### SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

N BEHALF OF CANDIDATES	FUN FED	ERAL OFFICE	=		PAGE	OF
2 U.S.C. §441a(d))	General Election)	FOR LINE 2	25 OF FORM 3X			
las your dommittee been designated to ma coordinated expenditures by a political party		PAC Full Name of Subo	ordinate Commit	tee		
YES NO YES, name the designating committee:		Mailing Address			· <del></del>	<del></del>
TES, Halle the designating committee.						
		City		Sta	ite ZIP	Code
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	Category/
Mailing Address				Date		Туре
City	State	Zip Code				
Name of Federal Candidate Supported	Office Sough	House Senate Presidential	State:	Amount		Mana Moranakara di mandi Barana Moranakara di mandi Barana di manda di mand
Aggregate General Election Expenditure for this Candidate						
Full Name (Last, First, Middle Initial) of  Mailing Address	Each Payee			Purpose of Expe	enditure	Category/ Type
Maining Address				Date	<del></del>	1,1900
City	State	Zip Code			6 9 6 7	
Name of Federal Candidate Supported	Office Sough	House Senate Presidential	State: District:	Amount		
Aggregate General Election Expenditure for this Candidate		and the second second second second			erallamenti emili emi	inemetranifitaenitera <sub>i</sub> i
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Expe	enditure	Category/
Mailing Address				Poto		Туре
City	State	Zip Code		Date		
Name of Federal Candidate Supported	Office Sough	House Senate Presidential	State:	- Amount		
Aggregate General Election Expenditure for this Candidate	Anna de la Constantina del Constantina de la Con			Parameter Annexa Marine de Parame		termoderacificilence acrasil
SUBTOTAL of Expenditures This Page (opt	ional)				who we have the sale	0000
OTAL This Period (last page this line num	ber only)					0000

#### SCHEDULE H1 (FEC Form 3X)

#### **METHOD OF ALLOCATION FOR:**

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnented Committees Only)

NAME OF COMMITTEE (In Fully							
NAME OF COMMITTEE (In Full)  Expasing Marxists PAC							
USE ONLY ONE SECTION, A or B							
A. State and Local Party Committees							
Fixed Percentage (select one)							
Presidential-Only Election Year (28% Federal)							
Presidential and Senate Election Year (36% Federal)							
Senate-Only Election Year (21% Federal)							
Non-Presidential and Non-Senate Election Year (15% Federal)							
B. Separate Segregated Funds and Nonconnected Committees							
Flat Minimum Federal Percentage							
If the committee will allocate using the flat minimum percentage of 50% federal funds, check							
If the committee is spending more than 50% federal funds, indicate ratio below							
Federal%							
Nonfederal %							
This ratio applies to (check all that apply):							
Administrative Generic Voter Drive Public Communications Referencing Party Only							

#### SCHEDULE H2 (FEC Form 3X) PAGE OF **ALLOCATION RATIOS** NAME OF COMMITTEE (In Full) Marx 15TS EXD OSINA RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT **ACTIVITIES APPEARING ON THIS REPORT.** Methods of allocation: I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised. II. Shared DIRECT CARDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method. **ACTIVITY OR EVENT IDENTIFIER FEDERAL % NONFEDERAL %** ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER FEDERAL % **NONFEDERAL %** ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: Revised Same as Previously Reported New **ACTIVITY OR EVENT IDENTIFIER FEDERAL %** NONFEDERAL % ACTIVITY IS: Direct Candidate Support Fundraising CHECK IF THE RATIO IS: Revised Same as Previously Reported New **ACTIVITY OR EVENT IDENTIFIER** FEDERAL % **NONFEDERAL %** ACTIVITY IS: management in the end in Fundraising Direct Candidate Support CHECK IF THE RATIO IS: · Same as Previously Reported New Revised **ACTIVITY OR EVENT IDENTIFIER** FEDERAL % **NONFEDERAL %** ACTIVITY IS: Direct Candidate Support Fundraising CHECK IF THE RATIO IS: New Revised Same as Previously Reported **ACTIVITY OR EVENT IDENTIFIER**

**NONFEDERAL %** 

FEDERAL %

ACTIVITY IS:

Fundraising

New

CHECK IF THE RATIO IS:

Revised

Direct Candidate Support

Same as Previously Reported

### SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	=	_	OF		

	FOR LINE 18a OF FORM 3X
NAME OF COMMITTEE (In Full)	
Exposing Marxists PAC	
NAME OF ACCOUNT DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
A A A A A A A A A A A A A A A A A A A	
Records Broader Commence Comme	
BREAKDOWN OF TRANSFER RECEIVED	
i) Total Administrative	hannal and describe and an administration of the second and the se
ii) Generic Voter Drive	
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iii) Exempt Activities	Anna di manda manda di Maranda and Maranda di Maranda manda manda manda manda manda manda manda manda manda ma
iv) Direct Fundraising (List Activity or Event Identifier)	
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a)	
b)	
To continue the continue that the continue t	
c) Total Amount Transferred For Direct Fundraising	And the state of t
v) Direct Candidate Support (List Activity or Event Identifier)	
	ang.
a)	The state of the s
The surface of the su	
b)	
c) Total Amount Transferred For Direct Candidate Support	
	the state of the s
vi) Public Communications Referring Only to Party (Made by PAC)	Secretaria de la companya del companya de la companya del companya de la companya del la companya de la company
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED.	
TOTAL This Period (Administrative)	
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TOTAL This Period (Generic Voter Drive)	Cart of Brown Inc. and Brown Concess
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TOTAL This Period (Direct Fundraising)	Marchaellachtamharchae Christian
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TOTAL This Period (Total Amount Transferred)	man America Branch Branch and South State of the Control of the Co

#### SCHEDULE H4 (FEC Form 3X)

#### DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	OF	
		<del></del>
IFOR LINE	= 21a OF	FORM 3Y

			FOR LINE 21a OF FORM 3X
	AME OF COMMITTEE (In FUIL) TEXPOSITION MAINTEE PAC		
			Allocated Activity or Event:
A.	Full Name (Last, First, Middle Initial)		
	Mailing Address		Administrative Fundraising Exempt
	Trialing Addition		Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	D		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:		
	Activity or Event Identifier:	-0	La Carlo de La Car
	Ca	ategory/ Type	Date
	FEDERAL SHARE + NONFEDERAL SHAP	RE	= TOTAL AMOUNT
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В.	Full Name (Last, First, Middle Initial)	1	Allocated Activity or Event:
			Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code	-	Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		Allocated Activity or Event Year-To-Date
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	Activity or Event Identiller.	ategory/	LEGIE ( DOLOGY ) HOLOGY ON
		Туре	Date
	FEDERAL SHARE + NONFEDERAL SHAF		TOTAL AMOUNT
		American Course of	Control of the section of the sectio
			Lanakhand
C.	Full Name (Last, First, Middle Initial)	İ	Allocated Activity or Event:
	Mailing Address		Administrative Fundraising Exempt
	Maining Address	j	Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		Allocated Activity or Event Year-To-Date
	Purpose of Disoursement.	-	
	Activity or Event Identifier:	demokrani	have be about Decolored to Decolored to our forms
	Ca	ategory/ Type	Date Date
	FEDERAL SHARE + NONFEDERAL SHAF	RE	= TOTAL AMOUNT
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SU	BTOTAL of Allocated Federal and NonFederal Activity This Page		
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#### SCHEDULE H5 (FEC Form 3X)

#### TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(10 be used by Black	s, bistilu aliu Loca	raity Committee			FOR LINE 18b OF FORM 3X
NAME OF COMMITTEE					
	Marxists				
NAME OF ACCOUNT	•	DATE OF RECEIPT		TOTAL AMO	UNT TRANSFERRED
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BREAKDOWN OF T	HIS TRANSFER				
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1	ount Transferred for Voter	Registration	and the state of t		
ii) Voter ID			V(	OTER ID	
•	ount Transferred for Voter	ID		7.75.4	
				GOTV	SCHOOL ST
iii) GOTV	ount Transferred for GOT\	,	S. serdinorestan	and the state of t	and an and an analysis of the same of the
iotal Alli	built Hallsleffed for GOT	<b>,</b>	innet me force	ALL CANE	
1	Campaign Activity		<b>3</b>	GENERIC CAMP	AIGN ACTIVITY
Total Am	ount Transferred for Gene	ric Campaign Activity	<b>L</b> _		
NAME OF ACCOUNT		DATE OF RECEIPT	<del></del>	TOTAL AMO	UNT TRANSFERRED
		13161 / 10161	/ <b>*******</b>	STATES AND PROPERTY AND ADDRESS.	and make make and analysis of the same of
				Lana	
BREAKDOWN OF T	HIS TRANSFER				
(	egistration		VOTER REGISTR	ATION	
i -	ount Transferred for Voter	Registration	A Property of the Party of the		
				OTER ID	:
ii) Voter ID			Amendari estimatamentare	<u> </u>	
lotal Am	ount Transferred for Voter	ID	Translate of the soul Desired States	adamatikan disemberah di ka	us Berney vil
iii) GOTV			Separation of the separation o	GOTV	arrille promision residence
Total Am	ount Transferred for GOT\	/			
iv) Generic	Campaign Activity		africa.	GENERIC CAMP	PAIGN ACTIVITY
	ount Transferred for Gene	ric Campaign Activity			
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IOIAL INS Pe	riod (Voter Registration)		Andrew Construction		
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TOTAL This Per	riod (Generic Campaign Ad	ctivity)	ne te com		
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TOTAL This Per	riod (Total Amount of Trans	sfers Received)		,,	and the state of the section of the
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## SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF
FOR LINE 30a OF FORM 3X

	,,
NAME OF COMMITTEE (In Full)	
Exposing Marxists PAC	
A. Full Name (Last, First, Middle Initial) / Full Organization Nar	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaig
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	
Purpose of Disbursement	Category/ Type Date
FEDERAL SHARE +	LEVIN SHARE = TOTAL AMOUNT
B. Full Name (Last, First, Middle Initial) / Full Organization Nan	
S. Fall Hallo (220, Filo), Missio Milay, Francisco Filo	Voter Registration GOTV Voter ID Generic Campaig
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	
Purpose of Disbursement	Category/ Type Date
FEDERAL SHARE +	LEVIN SHARE = TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Nam	
	Type of Allocated Activity or Event:  Voter Registration GOTV
C. Full Name (Last, First, Middle Initial) / Full Organization Nam	Type of Allocated Activity or Event:  Voter Registration  GOTV  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date
C. Full Name (Last, First, Middle Initial) / Full Organization Nan	Type of Allocated Activity or Event:  Voter Registration  GOTV  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date
C. Full Name (Last, First, Middle Initial) / Full Organization Nam  Mailing Address  City State Zip Code  Purpose of Disbursement  FEDERAL SHARE +	Type of Allocated Activity or Event:  Voter Registration  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date  Category/ Type  Date  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Nam  Mailing Address  City State Zip Code  Purpose of Disbursement  FEDERAL SHARE +	Type of Allocated Activity or Event:  Voter Registration  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date  Category/ Type  Date  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Nam  Mailing Address  City State Zip Code  Purpose of Disbursement  FEDERAL SHARE +	Type of Allocated Activity or Event:  Voter Registration  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date  Category/ Type  Date  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Nam  Mailing Address  City State Zip Code  Purpose of Disbursement  FEDERAL SHARE +  SUBTOTAL of Shared Federal and Levin Activity This Page FEDERAL SHARE +	Type of Allocated Activity or Event:  Voter Registration  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date  Category/ Type  Date  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Nam  Mailing Address  City State Zip Code  Purpose of Disbursement  FEDERAL SHARE +  SUBTOTAL of Shared Federal and Levin Activity This Page  FEDERAL SHARE +	Type of Allocated Activity or Event:  Voter Registration  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date  Category/ Type  LEVIN SHARE  TOTAL AMOUNT  LEVIN SHARE  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Nam  Mailing Address  City State Zip Code  Purpose of Disbursement  FEDERAL SHARE +  SUBTOTAL of Shared Federal and Levin Activity This Page  FEDERAL SHARE +	Type of Allocated Activity or Event:  Voter Registration  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date  Category/ Type  LEVIN SHARE  TOTAL AMOUNT  LEVIN SHARE  TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Organization Nam  Mailing Address  City State Zip Code  Purpose of Disbursement  FEDERAL SHARE +  SUBTOTAL of Shared Federal and Levin Activity This Page  FEDERAL SHARE +  TOTAL This Period (last page for each line only)(Federal share to FEDERAL SHARE)	Type of Allocated Activity or Event:  Voter Registration  Voter ID  Generic Campaig  Allocated Activity or Event Year-To-Date  Category/ Type  LEVIN SHARE  TOTAL AMOUNT  LEVIN SHARE  TOTAL AMOUNT  TOTAL AMOUNT

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#### SCHEDULE L (FEC Form 3X)

#### **AGGREGATION PAGE: LEVIN FUNDS**

NAM	AE OF COMMITTEE (In Full)  XDOSINA MAIXISTS	PAG	
NAM	ME/OF ACCOUNT		
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)		
	(b) Unitemized		
	(c) Total		
2.	OTHER RECEIPTS		
3.	TOTAL RECEIPTS(Add Lines 1c and 2)		
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	(a) Voter Registration		
	(b) Voter ID		
	(c) GOTV		
	(d) Generic Campaign		
	(e) Total		
5.	OTHER DISBURSEMENTS		
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)		
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)		
8.	RECEIPTS(from Line 3)		
9.	SUBTOTAL(Add Lines 7 and 8)		
10.	DISBURSEMENTS(From Line 6)		
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)		

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SCHEDULE L-A (FEC Form 3X) PAGE OF Use separate schedule(s) ITEMIZED RECEIPTS OF LEVIN FUNDS FOR LINE NUMBER: for each category of the Aggregation Page (check only one) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Fulf) Full Name (Last, Efrst, Middle Initial) / Full Organization Name Date of Receipt **Mailing Address** Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt В. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

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### SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBI	ER:	PAG	Ε		OF	
(check only one)	—	4a		4c	<u></u> 5	
	1	4b		4d		

0	F LEVIN FUNDS	Aggregation Page	4b4d
Ai Oi	ny information copied from such Reports and Statements may no for commercial numbers, other than using the name and addre	ot be sold or used by any persons of any political committee.to.	n for the purpose of soliciting contributions solicit contributions from such committee.
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)  EXPOSING MARXISTS PAC		
A.	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Disbursement
		· · · · · · · · · · · · · · · · · · ·	W.M. \ 0.00 \ VEA.24.14
	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement		
B.	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Disbursement
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	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement		
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٠.			Date of Disbursement
	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement		
_	Full Name (Last, First, Middle Initial) / Full Organization Name		
J.			Date of Disbursement
	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement		
_	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Dishumanan
Ξ.			Date of Disbursement
	Mailing Address		
	City State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement		The second secon
s	UBTOTAL of Disbursements This Page (optional)	<b>•</b>	
T	OTAL This Period (last page this line number only)		and the second constitution of the second consti

## Federal Election Commission

The FEC added this page to the end of this filing to	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 1/28/13
Delivery Confirmation™ or Signatu	re Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next	Business Day Delivery
Received from House Records & Registration Off	Date of Receipt fice
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
W	1/31/)3
PREPARER	DATE PREPARED

(3/2005)